RALF Program
AP & Ombudsman Meeting
May 24, 2012
Medicaid Central Office

Licensing & Certification

Residential Care Assisted Living Program

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Website Information

- State Statutes - Idaho Code (IC)
- State Rules - Idaho Administrative Procedures Act (IDAPA)
- RALF Informational Letters
- Frequently Asked Questions
- Reportable Incident Guidelines
- Past Presentations
- Facility Lists
- Facility Survey/Inspection Reports
- Facility Excellence Awards
- List of Unsprinklered Facilities
- Quality Assurance Checklists
- Online Courses
Ralf Program’s Mission

To ensure the residents of Idaho’s RALFs receive quality care in a safe, humane, home-like living environment where their rights are protected.
RALF Guidelines

- Idaho Statute: Title 39  Chapter 33
- IDAPA 16.03.22
RALF Surveyors

Polly Watt-Geier MSW
Karen Anderson RN
Rae Jean McPhillips, RN
Donna Henscheid LSW
Maureen McCann RN
Rachel Corey, RN
Matt Hauser, QMRP
Gloria Keathley LSW
Residential Care or Assisted Living Facility (RALF):

A facility or residence...for the purpose of providing necessary supervision, personal assistance, meals and lodging to 3 or more adults.
RALFs in Idaho

RALFs statewide: 347
Who lives in RALFs?

- Physical disability: 1%
- Traumatic Brain Injury: 1%
- Mental Illness: 11%
- Elderly: 47%
- Developmental Disabilities: 4%
- Alzheimer/Dem: 33%
New Licenses 2011

New licensures: 27
- 6 new facilities
- 5 conversions
- 13 changes of ownership
- +3 Additions/increased capacity

234 new beds
- New beds by region:
  - I: 46
  - II: 16
  - III: 0
  - IV: 108
  - V: 48
  - VI: 0
  - VII: 16

Current Applications: 8 changes of ownership,
- 3 new construction, 6 expansion, 8
- conversions for additional 263 new beds
Surveys

1. Health Care Licensure Survey
   - Outcome oriented survey process
   - Tour, observations, interviews, resident and staff
     record reviews, environment, Idaho food code
   - Annually or every 36 months if no core deficiency for 2
     consecutive surveys

2. Complaint Investigations: 2 days, 60 days or next visit

3. Follow-Up surveys: 45-90 days after core

4. Initial Surveys: 90 days after 1st admission

5. Fire Life Safety: Annually or every 36 months if no core
deficiency for 2 consecutive surveys
Surveys Completed 2011

- Initial: 12
- Standard: 119
- Follow up: 44
- Complaint: 171

R alf
Deficiencies

Core Issue deficiency

- abuse; neglect; exploitation; inadequate care; more than 30 days without a licensed administrator; inoperable fire detection or extinguishing systems with no fire watch; surveyors denied access

Non-core issue deficiency

(punch list)

- All other non-compliance with rules that does not rise to level of core issue.
Core Deficiencies of Abuse, Exploitation, Neglect

These deficiencies are cited when the facility does not follow their policies and procedure when an allegation of either abuse, neglect or exploitation is made.
Examples

- Not reporting an allegation of abuse, neglect or exploitation to Adult Protection

- Not protecting the resident involved and other potential residents from further abuse, neglect or exploitation during the investigation.
Core Issues 2011

- 215.03 Operating for more than 30 days without a licensed administrator (6)
- 510 Abuse (6)
- 515 Exploitation (2)
- 520 Inadequate Care (35)
- 525 Neglect (3)
Top ten non-core/punch list deficiencies cited during Healthcare surveys in 2011

305.02  (35) Current Med Orders
260.06  (34) Housekeeping
335.03  (33) Universal Precautions
310.04.e (32) Psychotropic medication reviews and behavior updates
300.01  (32) Nurse assessment every 90 days and at change of condition
Top ten non-core/punch list deficiencies continued

250.10  (32) Hot water temperature
350.02  (29) Investigation and written response to complainant within 30 days
320.01  (28) Develop and implement NSA
350.04  (26) Written response to complainant
009.04  (25) Not submitting fingerprints to Criminal History Unit within 21 days of hire
### Where Do Complaints Come From?

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family/Friend</td>
<td>29%</td>
</tr>
<tr>
<td>Current Staff</td>
<td>7%</td>
</tr>
<tr>
<td>Former Staff</td>
<td>12%</td>
</tr>
<tr>
<td>Anonymous</td>
<td>19%</td>
</tr>
<tr>
<td>Resident</td>
<td>6%</td>
</tr>
<tr>
<td>Other agency</td>
<td>28%</td>
</tr>
</tbody>
</table>
Frequency of Complaints

Complaints received in 2011: 184
RALFs: 349   Licensed Beds: 8809
Complaints per facility: .52
Complaints per 100 licensed beds: 2.08

For a 100 bed facility, 2 complaints per year would be average
For an 8 bed facility, @ 1 complaint every 6 years would be average
Complaint Intake

- Violation of rule (IDAPA 16.03.22)
- Direct Knowledge of incident
Complaint Priorities

Priority 1: IJ: 2 working days
serious injury, harm, impairment, or death to a resident

Priority 2: Non-IJ High: 60 calendar days
Alleges not in compliance with care requirements.

Priority 3: Non-IJ Low: 180 calendar days
Represents non-compliance that does not directly affect resident care.
Complaint Investigations

Investigation

- Entrance, observations, interviews, record reviews, exit, investigation report, survey report
What % are Substantiated?

558 Allegations
256 (45%) substantiated
302 (54%) unable to substantiate or unsubstantiated
RALF PROGRAM’S ROLE

Through surveys and education we ensure facilities are following the IDAPA rules in order that residents receive quality care, but…
Working Together

When we work together (RALF Program, APS and Ombudsman), we can make a larger difference in the lives of all the residents who reside in Idaho’s assisted living facilities.